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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) RATE FEE NUMBER EXTRA RATE FEE NUMBER FILED FOR 36000 380 BASIC FEE OR (37 CFR 1.16(a)) 18= TOTAL CLAIMS x s 9 OR minus 20 = (37 CFR 1.16(c)) x s 78 INDEPENDENT CLAIMS OR minus 3 = (37 CFR 1.16(b)) OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 090 TOTAL OR TOTAL * If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR SMALL ENTITY (Column 3) SMALL ENTITY (Column 2) (Column 1) HIGHEST CLAIMS ADDI-RATE PRESENT RATE ADDI-NUMBER REMAINING TIONAL TIONAL **EXTRA** PREVIOUSLY ENDMENT AFTFR FEE FEE AMENDMENT PAID FOR Minus Total Ц 24 OR (37 CFR 1.16(c) P4.00 Independent (37 CFR 1 16(b)) Minus U 42= OR + s 280 = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS RATE ADDI-ADDI-PRESENT RATE NUMBER ω REMAINING TIONAL **TIONAL FXTRA** PREVIOUSLY AFTER **IENT** FEE FEE PAID FOR AMENDMENT Minus Total (37 CFR 1.16(c)) OR ENDMI Minus Independent (37 CFR 1.16(b)) 3 OR \bar{z} + 5080= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS RATE ADDI-PRESENT RATE ADDI-NUMBER REMAINING TIONAL **TIONAL EXTRA PREVIOUSLY AFTER** FEE ENDMENT FEE PAID FOR AMENDMENT Minus Total OR Į. (17 CFR 1.16(6)) ż Minus × \$86 Independent (37 CFR 1.16(b)) OR + 5290= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + 5 145= TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradernark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 452,367 Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) NUMBER EXTRA FFF RATE FEE RATE NUMBER FILED FOR BASIC FEE OR (37 CFR 1.16(a)) TOTAL CLAIMS OR minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAIMS OR minus 3 = (37 CFR 1.16(b)) OR (37 CFR 1.16(d)) MULTIPLE DEPENDENT CLAIM PRESENT TOTAL OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS PRESENT RATE ADDI-RATE ADDI-NUMBER REMAINING TIONAL TIONAL PREVIOUSLY **EXTRA AFTER AMENDMENT** FEE PAID FOR FEE AMENDMENT Total Minus OR (37 CER 1.16(ci) Minus Independent 5 OR s290 = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ÓR ADD'L FEE ADD'L FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST RATE ADDI-PRESENT RATE ADDI- ω REMAINING NUMBER TIONAL **EXTRA** TIONAL PREVIOUSLY AFTER ENDMENT FEE FEE PAID FOR **AMENDMENT** Minus Total OR (37 CFR 1.16(c)) = Minus Independent (37 CFR 1.16(b)) OR X \$ ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS RATE ADDI-PRESENT ADDI-RATE O NUMBER REMAINING TIONAL **EXTRA** TIONAL PREVIOUSLY **AFTER** AMENDMENT FEE FEE AMENDMENT PAID FOR Total Minus X \$ X \$ OR Minus Independent (37 CFR 1.16(b)) X S OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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